24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)		FOR SE OF FO	ORM 24/48		
NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼					
Senate Conservatives Fund		C C00448696			
		0 000440090			
Check if X 24-hour report 48-hour report New report Amends report filed on					
Full Name of Payee	Da	ate of Public Distribution/Dis	semination		
Senate Conservatives Fund		06 07 Y	2016		
Mailing Address PO Box 388	Ar	mount			
City State Zip Code	— г		43.00		
Alexandria VA 22313-0388		Transaction ID : E0C7962CDFC5D47B781E Date of Disbursement or Obligation			
Purpose of Expenditure IE-Crane-Donation Processing Category, Type	,		2016		
Name of Federal Candidate	Support Office So	ought: X House Dis	trict: 03		
Michael Behart Crops		esident Senate S	tate: GA		
Calendar Year-To-Date Per Election for Office Sought	2016	ment For: Primary Other (specify) ▶ Primary	General ary Run-Off		
Full Name of Payee	'	ate of Public Distribution/Dis			
Senate Conservatives Fund		M = M / D = D / Y	- Y - Y - Y		
Mailing Address PO Box 388		06 14	2016		
	Ar	mount			
City State Zip Code	П	1 1 40 1 1 7 1	133.05		
Alexandria VA 22313-038		ansaction ID : EA05DC1BA2 ate of Disbursement or Obli			
Purpose of Expenditure IE-Crane-Donation Processing Category/ Type		06 / 14	2016		
	Support Office Sc	ought: X House Dis	trict:03		
Michael Robert Crane	Oppose Pre	esident Senate S	tate: GA		
Calendar Year-To-Date Per Election for Office Sought 352.6	5 2016	ment For: Primary	General ary Run-Off		
		Other (specify) ► Prim	ary Null-Ull		
(a) SUBTOTAL of Itemized Independent Expenditures					
(b) SUBTOTAL of Unitemized Independent Expenditures	······ •				
(c) TOTAL Independent Expenditures	······				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Paul Kilgore [Electronically Filed]	Date 07	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Y		
Signature					

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)		FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼					
Senate Conservatives Fund		C C00448696			
		[-]			
Check if 24-hour report 48-hour report New report Amends report filed on					
Full Name of Payee Envision Printers/Marketing		Date of Public Distribution/Dissemination			
		06 20 7 2016			
Mailing Address 2 Riverbend Pkwy		Amount			
City State Zip Code)	5290.91			
Leesburg VA 20176-0	000	Transaction ID : EF9D8A98ED1FE49E19B7 Date of Disbursement or Obligation			
Purpose of Expenditure IE-Crane-Direct Mail Production Categor Typ		06 21 2016			
Name of Federal Candidate	Support Office	Sought: X House District:03			
Michael Robert Crane		President Senate State: GA			
Calendar Year-To-Date Per Election for Office Sought 5643		rsement For: Primary General Other (specify) ▶ Primary Run-Off			
Full Name of Payee		Date of Public Distribution/Dissemination			
Senate Conservatives Fund		06 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address PO Box 388		Amount			
City State Zip Code)	76.00			
Alexandria VA 22313-0	388	Transaction ID : EB021543627364AFFB6B Date of Disbursement or Obligation			
Purpose of Expenditure IE-Crane-Donation Processing Category Type		06 / 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate	Support Office	Sought:			
Michael Robert Crane		President Senate State: GA			
Calendar Year-To-Date Per Election for Office Sought 5719	0040	rsement For: Primary General Other (specify) Primary Run-Off			
,		5366.91			
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	1 7 1 7 1 7 1			
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Paul Kilgore [Electronically Filed	Date 07	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Signature					

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Sc	chedule E)	.5.1.51126	PAGE 3 OF 4 FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼		
5	enate Conservatives Fund		C C00448696		
Check if 24-hour report 48-hour report Mew report Amends report filed on					
П	Full Name of Payee		Date of Public Distribution/Dissemination		
	Senate Conservatives Fund		06 28 2016		
١	Mailing Address PO Box 388		Amount		
ı	City State	Zip Code	37.25		
	Alexandria VA	22313-0388	Transaction ID : EC118B6089E5B4D33858 Date of Disbursement or Obligation		
	Purpose of Expenditure IE-Crane-Donation Processing	Category/ Type	06		
ı	Name of Federal Candidate	X Support	Office Sought: X House District: 03		
	Michael Robert Crane	Oppose	President Senate State: GA		
	Calendar Year-To-Date Per Election for Office Sought	5756.81	Disbursement For: Primary General 2016 Primary Primary Run-Off		
ľ	Full Name of Payee		Date of Public Distribution/Dissemination		
١	Senate Conservatives Fund		06 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	Mailing Address PO Box 388		Amount		
ı	City State	Zip Code	119.75		
١	Alexandria VA	22313-0388	Transaction ID : E94A1A20BCF334BEC8BI Date of Disbursement or Obligation		
	Purpose of Expenditure IE-Crane-Donation Processing	Category/ Type	06 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
١	Name of Federal Candidate	X Support	Office Sought:		
	Michael Robert Crane	Oppose	President Senate State: GA		
	Calendar Year-To-Date Per Election for Office Sought	5876.56	Disbursement For: Primary General 2016 Other (specify) ▶ Primary Run-Off		
(a) SUBTOTAL of Itemized Independent Expenditures					
(b) SUBTOTAL of Unitemized Independent Expenditures					
	(c) TOTAL Independent Expenditures		>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
	Paul Kilgore IElect	tronically Filed] Date	07 11 2016		
	Signature	Date	57 11 2010		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	INDITIONEO	PAGE 4 OF 4 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼			
Senate Conservatives Fund		C C00448696			
Check if X 24-hour report 48-hour report X New report Amends report filed on					
Full Name of Payee		Date of Public Distribution/Dissemination			
Senate Conservatives Fund		07 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address PO Box 388		Amount			
City State	Zip Code	555.50			
Alexandria VA	22313-0388	Transaction ID : E21D5457B072E412D8A8 Date of Disbursement or Obligation			
Purpose of Expenditure IE-Crane-Donation Processing	Category/ Type	07 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate	Support Of	fice Sought: X House District: 03			
Michael Robert Crane	Oppose	President Senate State: GA			
Calendar Year-To-Date Per Election for Office Sought	6432.06 Dis	sbursement For: Primary General 16			
Full Name of Payee		Date of Public Distribution/Dissemination			
Senate Conservatives Fund		07 11 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address PO Box 388		Amount			
City State	Zip Code	33.50			
Alexandria VA	22313-0388	Transaction ID : E408E7D7675AB4588830 Date of Disbursement or Obligation			
Purpose of Expenditure IE-Crane-Donation Processing	Category/ Type	07			
Name of Federal Candidate	X Support Of	fice Sought: House District: 03			
Michael Robert Crane	Oppose	President Senate State: GA			
Calendar Year-To-Date Per Election for Office Sought		sbursement For: Primary General 116 Primary Run-Off Other (specify) ▶ Primary Run-Off			
(a) SUBTOTAL of Itemized Independent Expenditures		589.00			
(b) SUBTOTAL of Unitemized Independent Expenditures					
(b) 306101AL of Officernized independent Experiancies	·····	7 7 7			
(c) TOTAL Independent Expenditures	······	6288.96			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Paul Kilgore [Ele	ectronically Filed] Date	07 11 2016			
Signature					